ξ,

Effective October 1, 2001

**Application or Docket Number** 

10074747

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			180					RATE	FEE	1 1	RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE		OB	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			/ <b>8 O</b> minus 20=		* //	60		X\$ 9=		ĺ	X\$18=	2880	
IND	EPENDENT CL	AIMS	<b>24</b> minus 3 =		* 2-1					OR			
MULTIPLE DEPENDENT CLAIM PRESENT							X42=		OR	X84=	1764		
								+140=		OR	+280=	8	
* If the difference in column 1 is less than zero, enter "0" in column 2							•	TOTAL		OR	TOTAL	5384	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								SMALL ENTITY OR			OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	]	X42=		OR	X84=		
<b>'</b>	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		<b>]</b>	. 1.10			.000		
							l	+140=.		OR	+280= TOTAL		
(Oalumu 1)								ADDIT. FEE		OR	ADDIT. FEE		
		(Column 1) CLAIMS	<u> </u>	(Colui		(Column 3)	1 r		ADDI			455	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	]	X42=		OR	X84=		
Ľ	FIRST PRESE	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						.140			.000		
							L	+140= TOTAL		OR	+280= TOTAL		
								DDIT. FEE		OR	ADDIT. FEE		
		(Column 1) CLAIMS		(Colur HIGH		(Column 3)	1 -						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	, <u>, , , , , , , , , , , , , , , , , , </u>	
	Independent	*	Minus	***		Ξ.	<b>]</b>	X42=			X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┇┋			OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=		
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												